BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER: North American Galvanizing Co.	U.S. ENVIRO					
SITE NAME: St. Louis 1461 Kin Ark (4. , St. Louis, MD 63132	1997 Hazardous	Waste Report				
EPAID NO: MICIDI CICIE RIBIHI (31315)	FORM IDENTIFICA IC CERTIFIC					
Instructions: Please see the detailed instructions beginning completing this form. In addition, the page number for instructions.	g on page 7 of the instructions and forms ructions specific to each section is provid	booklet before ed below.				
Sec. I Site name and location address. Check the box \Box in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.						
A. EPA ID No. Same as label poor → LIIILIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	B. County Same as label □ or → 5+. Louis					
C. Site/company name Same as label ⊅(or →	D. Has the site name associated with this EPA ID changed since 1995? 1 Yes 2 No					
E. Street name and number. If not applicable, enter industrial park, buil Same as label ⊠or →	ling name, or other physical location description.					
F. City, town, village Same as label ¤⊄or →	G. State Same as label or →	J-[
Sec. II Mailing address of site. Instructions page 7.						
A. Is the mailing address the same as the location address?						
B. Number and street name of mailing address						
C. City, town, village	D. State E. Zip Code					
Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.						
A. Last Name First name M.I.	B. Title C. Telephone Number [9] 18 [-15]	18 - 1914 2 C				

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a Sec. IV system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.

A. Last Name Hatcher

Halstead

First name Claude

Kerin

M.I.

B. Title

Vianager

Plant Manager

D. Date of signature

021/16/19/81 Day Year Month

Extension 2//01

RCRA RECORDS CENTER

Generator status. Instructi	ons begin on page 8.				
A. 1997 RCRA generator status	B. Reason for not generating				
CHECK ONE BOX BELOW)	(CHECK ALL THAT APPLY)				
(1 LQG 2 2 SQG SKIP TO SEC. VI 3 3 CESQG 4 Non-generator (CONTINUE TO BOX	 □ 1 Never generated □ 2 Out of business □ 3 Only excluded or delisted waste □ 4 Only non-hazardous waste 		 □ 5 Periodic or occasional generator □ 6 Waste minimization activity □ 7 Other (SPECIFY IN COMMENTS BOX BELOW) 		(BELOW)
Sec. VI On-site waste management	status. Instructions page 10.				
A. Storage subject to RCRA permitting	requirements	B. Treatm requireme		cycling subject to RC	RA permitting
comments:					

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR U.S. ENVIRONMENTAL ENTER: PROTECTION AGENCY SITE NAME: North American Galvanizing Cc. -1997 Hazardous Waste Report EPAID NO: MIDIDICICIS 1218141313151 WASTE GENERATION **FORM** AND MANAGEMENT GM Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses. A. Waste description (page 12) Spent hydrock locic acid from Pickling of steel preparation (cleaning) for hot dip galvanizing. Sec. I C. State hazardous waste code (page 13) B. EPA hazardous waste code DOIGIZI DOIGIGI (page 12) DIDICI7 DICICI8 111 G. Point of D. SIC code F. Source code H. Form code I. RCRA-radioactive mixed E. Origin code 1/1 measurement (page 14) -(page 14) (page 14) (page 13) (page 13) System Type (p. 14) 131417191 1A12161 1B1/10131 131 ıΔı $\lfloor M \rfloor \rfloor$ Sec. II A. Quantity generated in 1997 C. Did this site do any of the following to this waste: treat on site, B. UOM 151 (page 15) dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) (page 15) Density 1 1610141517 0 □ 1 lbs/gal \$42 sq □ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) ON-SITE PROCESS SYSTEM 1 **ON-SITE PROCESS SYSTEM 2** On-site process system type Quantity treated, disposed, or recycled On-site process system type Quantity treated, disposed, or recycled on site in 1997 (page 16) (page 16) on site in 1997 (page 16) (page 16) $\lfloor M \rfloor$ Γ_{W} A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) `

▼ 1 Yes (CONTINUE TO BOX B) □ 2 No (FORM IS COMPLETE) B. EPA ID No. of facility waste was shipped to C. System type D. Off-site availability E. Total quantity shipped in 1997 (page 17) Site 1 shipped to (p. 17) code (page 17) LIII6101415171 C 1014101101210112171311811191 M113141 1/1 Site 2 B. EPA ID No. of facility waste was shipped to D. Off-site availability E. Total quantity shipped in 1997 (page 17) C. System type shipped to (p. 17) code (page 17) (page 17) L_{M} Site 3 B. EPA ID No. of facility waste was shipped to C. System type D. Off-site availability E. Total quantity shipped in 1997 (page 17) (page 17) shipped to (p. 17) code (page 17) $\lfloor M \rfloor \rfloor$ Comments: